

MULTIPLE DEPEN.
CLM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/575016

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT					
	IND.		DEP.		IND.			IND.		DEP.		IND.		DEP.			
1	1							51									
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49								99									
50								100									
TOTAL IND.	1																
TOTAL DEP.	8																
TOTAL CLAIMS	9																